## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUL FEE Commissioner for Patents

P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further indicated unless correct maintenance fee notifica	ed below or directed of trions.	herwise in Bloo	ck I, by (	a) specifying a new co	orres	pondence address;	and/or	(b) indicating a sepa	rate "FEE	ADDRESS" [6]	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
James C. Wray Suite 300 1493 Chain Bridge Road						Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
Melean, VA 221	101					IVETTE REY	ES			(Depositor's name)	
						/Ivette Re	yes/	<u>'</u>		(Signature)	
						27 March 2	007_			(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVE		TOR	ATTOR		RNEY DOCKET NO.	D. CONFIRMATION NO.		
10/697,126 TITLE OF INVENTION	10/31/2003 I: GIFT BOX CONTAIN	Richard Mazurek			C	PG 03-44 KF	§	3461			
APPLNUTYPE	SMALL ENTITY	ISSUE FEE DUE		PUBLICATION FEE DU		PREV. PAID ISSUE FEE		TOTAL FEE(S) DUE	D.	DATE DUE	
nonprovisional	NO	NO \$1400		\$300		\$0		\$1700	04	/18/2007	
EXAMINER		ART UN	nT	CLASS-SUBCLASS							
ELKINS, GARY E		3782		229-122340		Į.					
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>KChange of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>KFFee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>				(1) the names of u or agents OR, alten (2) the name of a s registered attorney 2 registered patent listed, no name wit	the names of up to 3 registered patent attorneys gents OR, alternatively, the name of a single firm (having as a member a sistered attorney or agent) and the names of up to gistered patent attorneys or agents. If no name is ad, no name will be printed.						
(A) NAME OF ASSIG	less an assignee is ident h in 37 CFR 3.11. Comp	ified below, no pletion of this fo			ic pi an i	itent, If an assigne assignment. and STATE OR C			coment ha	s been filed for	
Please check the appropr	iate ussignee category or	categories (wil	l not be p	rinted on the patent):		Individual 🔯 Co	rporati	on or other private gro	up entity	Government	
	are submitted: To small entity discount p		41	b. Payment of Fec(s): ()  A check is enclose  Payment by credit  The Director is here overpayment, to D	ed. Lear	d. Form PTO-2038	is attac				
	s SMALL ENTITY state	is. See 37 CFR			_			TTY status. See 37 CF			
NOTE: The Issue Fee an interest as shown by the i	records of the United Sta	ites Patent and	frademark	Office.	(1	michandrent or refits		and the second second	- working !	- wasser from all the	
Authorized Signature	/Alexandr	a B Urba	n/	,				arch 2007			
***	e <u>ALEXANDR</u> A			•				45,171			
This collection of inform an application. Confident submitting the completed this form and/or suggesti Box 1450, Alexandria, V Alexandria, Virginia 223	tiality is governed by 35 d application form to the lons for reducing this bu Virginia 22313-1450. DC	FR 1.311. The U.S.C. 122 and USPTO, Time rden, should be ) NOT SEND F	information 137 CFR will vary sent to the EES OR	on is required to obtain 1.14. This collection is depending upon the is e Chief Information Of COMPLETED FORMS	or nos certifice	etain a benefit by the imated to take 12 m idual case. Any cou r, U.S. Patent and THIS ADDRESS.	e publi inutes nments fradem SENE	e which is to file (and to complete, including on the amount of tin ark Office, U.S. Depa of TO: Commissioner i	by the USI g gathering ie you requ rtment of C or Patents,	PTO to process), preparing, and sire to complete commerce, P.O. P.O. Box 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.